

Recipient Committee
Campaign Statement
Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Statement covers period
from 10/17/04
through 10/26/04

Date of election if applicable:
(Month, Day, Year)
11/2/04

Date Stamp
RECEIVED
CITY OF MOUNTAIN VIEW
04 OCT 28 A 9:04
CALIFORNIA 2001/02 FORM 460
Page 1 of 6
For Official Use Only

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
(Also Complete Part 5)
- ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
- ☐ Ballot Measure Committee
☐ Primarily Formed
☐ Controlled
☐ Sponsored
(Also Complete Part 6)
- ☐ Primarily Formed Candidate/
Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- ☒ Preelection Statement
☐ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1262884

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Friends of Stephanie Schaaf

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Mountain View CA 94041

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Patrick Shields

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Sunnyvale CA 94087

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 10/27/04
Date

Executed on 10/27/04
Date

Executed on _____
Date

Executed on _____
Date

By _____
Signature of Treasurer or Assistant Treasurer

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10/17/04</u> through <u>10/26/04</u>	CALIFORNIA FORM 460
Page <u>2</u> of <u>6</u>	I.D. NUMBER <u>1262884</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Stephanie Schaaf

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$ <u>175.00</u>	\$ <u>13340.28</u>
2. Loans Received <i>Schedule B, Line 3</i>	\$ <u>3500.00</u>	\$ <u>3500.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$ <u>3675.00</u>	\$ <u>16840.28</u>
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>	\$ <u>0</u>	\$ <u>169.17</u>
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$ <u>3675.00</u>	\$ <u>17009.48</u>

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made <i>Schedule E, Line 4</i>	\$ <u>4834.74</u>	\$ <u>13369.54</u>
7. Loans Made <i>Schedule H, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$ <u>4834.74</u>	\$ <u>13369.54</u>
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$ <u>4834.74</u>	\$ <u>13369.54</u>

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance <i>Previous Summary Page, Line 16</i>	\$ <u>4630.48</u>
13. Cash Receipts <i>Column A, Line 3 above</i>	\$ <u>3675.00</u>
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	\$ <u>0</u>
15. Cash Payments <i>Column A, Line 8 above</i>	\$ <u>4834.74</u>
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>3470.34</u>

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED <i>Schedule B, Part 2</i>	\$ <u>0</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents <i>See instructions on reverse</i>	\$ <u>0</u>
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>3500.00</u>

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>10/17/04</u> through <u>10/26/04</u>		CALIFORNIA FORM 460
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NAME OF FILER Friends of Stephanie Schaaf		I.D. NUMBER 1262884

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Stephanie Schaaf

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/19/04	Bruce Heflinger Mountain View CA 94043	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Hewlett Packard	100.00	100.00	
10/20/04	Jean McCloskey Mountain View CA 94041	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VP Tenacity Unlimited	75.00	98.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$

Schedule A Summary

- Amount received this period – contributions of \$⁵⁰~~100~~ or more.
(Include all Schedule A subtotals.) \$ 175.00
- Amount received this period – unitemized contributions of less than \$⁵⁰~~100~~ \$ 0
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 175.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from <u>10/17/04</u> through <u>10/26/04</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Stephanie Schaaf

I.D. NUMBER

1262884

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Stephanie Schaaf Mountain View, CA 94041 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Software Engineer Silicon Graphics	\$ 0	\$ 3500.00	<input type="checkbox"/> PAID \$ 0 <input type="checkbox"/> FORGIVEN \$ 0	\$ 3500.00 NA DATE DUE	0 % RATE \$ 0	\$ 3500.00 10/20/04 DATE INCURRED	CALENDAR YEAR \$ 3750.00 PER ELECTION** 3750.00
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS \$								

Schedule B Summary

(Enter (e) on
Schedule E, Line 3)

- Loans received this period \$ 3500.00
(Total Column (b) plus unitemized loans less than \$100.)
- Loans paid or forgiven this period \$ 0
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) **NET \$** 3500.00
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

*Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

† Contributor Codes

IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other PTY – Political Party SCC – Small Contributor Committee

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULEE

Statement covers period from 10/17/04 through 10/26/04		CALIFORNIA FORM 460
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NAME OF FILER Friends of Stephanie Schaaf		I.D. NUMBER 1262884

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Press San Jose 95129	LIT	Print Mailing	\$1,064.48
Diversified Direct Santa Clara CA 95050	LIT	Mailing House	\$1,902.77
The Press San Jose CA 95129	LIT	Print Mailing	\$1,461.41

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 4428.66

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ 4700.76
2. Unitemized payments made this period of under \$100	\$ 133.98
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 4834.74

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/17/04	through 10/26/04	
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mt View PO 94041	POS	postage	\$144.58
Mt View PO 94041	POS	postage	\$127.52

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 272.10